

CITY COUNCIL MEETING
SEPTEMBER 5, 1990

ABC LICENSE
APPLICATIONS

CC-7(f)

City Clerk Reimche presented the following Alcoholic Beverage License which had been received:

- a) Wunvilai Hagey, Thai Style, 100 West Turner Road, Ste 116-C, Lodi, On Sale Beer and Wine Eating Place, Original License.

COPY

Do not detach—Return all copies

Do Not Write Above This Line—For Headquarters Office Only

APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)

To: Department of Alcoholic Beverage Control
1901 Broadway Stockton
Sacramento, Calif. 95818

10. STATE RESIDING LOCATIONS: 7

The undersigned hereby applies for
licenses described as follows:

ALICE J. HARRIS

2. NAME(S) OF APPLICANT(S)CITY OF Lodi
CITY OF Lodi

HAGEY, Marvillai

1. TYPE(S) OF LICENSE(S)On Sale Beer & wine
Eating PlaceApplied under Sec. 24044 ☐

Effective Date: 1/1/90

FILE NO.**RECEIPT NO.****GEOGRAPHICAL
CODE****Date****Issued****Temp. Permit****Effective Date:****3. TYPE(S) OF TRANSACTION(S)****FEE****LIC.
TYPE**

Original Licensee

\$ 300.00

41

Annual Fee

198.00

4. Name of Business

Thai Style

5. Location of Business—Number and Street

100 West Turner Road, Ste. 116-C

City and Zip Code

Lodi, 95242

County

San Joaquin

TOTAL \$ 498.00**6. If Premises Licensed,**

Show Type of License

41

7. Are Premises Inside

City Limits? Yes

8. Mailing Address (if different from 5)—Number and Street

5017 Nicole St., Stockton, CA 95205

(Temp) (Perm)

Perm

9. Have you ever been convicted of a felony?

No

**10. Have you ever violated any of the provisions of the Alcoholic
Beverage Control Act or regulations of the Department per-
taining to the Act?**

No

11. Explain a "YES" answer to items 9 or 10 on an attachment which shall be deemed part of this application.**12. Applicant agrees (a) that any manager employed in on-sale licensed premises will have all the qualifications of a licensee, and
(b) that he will not violate or cause or permit to be violated any of the provisions of the Alcoholic Beverage Control Act.****13. STATE OF CALIFORNIA**

County of San Joaquin

Date 8-13-90

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the applicant, or one of the applicants, or an executive officer of the applicant corporation, named in the foregoing application, duly authorized to make this application on its behalf; (2) that he has read the foregoing application and knows the contents thereof and that each and all of the statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant's or applicants' business to be conducted under the license(s) for which this application is made; (4) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety (90) days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for an creditor of transferor or to defraud or injure any creditor of transferor; (5) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

14. APPLICANT

SIGN HERE

APPLICATION BY TRANSFEROR**15. STATE OF CALIFORNIA**

County of

Date

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the licensee, or an executive officer of the corporate licensee, named in the foregoing transfer application, duly authorized to make this transfer application on its behalf; (2) that he hereby makes application to surrender all interest in the attached license(s) described below and to transfer same to the applicant and/or location indicated on the upper portion of this application form; (3) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for an creditor of transferor or to defraud or injure any creditor of transferor; (4) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

16. Name(s) of Licensee(s)**17. Signature(s) of Licensee(s)****18. License Number(s)****19. Location**

Number and Street

City and Zip Code

County

Do Not Write Below This Line: For Department Use OnlyAttached: ☐ Recorded notice,☐ Fiduciary papers,☐

COPIES MAILED

8-13-90

☐ Renewal: Fee of

Paid at

Office on

Receipt No.